### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

## **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SECT	ION A - PROPERTY	NFORMATION		FC	R INSUR	ANCE COMPANY USE
A1. Building Owne STEVEN J DRURY					Po	licy Numb	per:
A2. Building Street Box No. 1406 ONTARIO ST	•	uding Apt., Unit, Suite,	and/or Bldg. No.)	or P.O. Route ar	nd Co	mpany N	AIC Number:
City WAVELAND			State	MS	ZII	Code 39	9576
A3. Property Descr TAX PARCEL ID #		d Block Numbers, Tax 17.000	Parcel Number, I	egal Description	, etc.)		
A4. Building Use (e	e.g., Resident	ial, Non-Residential, A	ddition, Accessor	, etc.) RESIDE	NTIAL		
A5. Latitude/Longit	ude: Lat. <u>30</u>	-13-18.3 L	ong. <u>89-23-57.5</u>	Hori	zontal Datum	NAD 1	927 🛛 NAD 83
A6. Attach at least	2 photograph	s of the building if the	Certificate is being	used to obtain f	lood insuranc	∋.	
A7. Building Diagra							
A8. For a building v	vith a crawlsp	ace or enclosure(s):					
a) Square foot	age of crawls	pace or enclosure(s)	N/A	sq ft			
b) Number of p	permanent flo	od openings in the cra	wispace or enclos	ure(s) within 1.0	foot above ad	jacent gra	ade N/A
c) Total net are	ea of flood op	enings in A8.b N/A	sq in				
d) Engineered	flood opening	gs? □Yes ☒No	)				
A9. For a building v	vith an attach	ed garaģe:					
a) Square foot	age of attach	ed garage N/A sq	ft				
b) Number of p	ermanent flo	od openings in the atta	 ached garage with	in 1.0 foot above	adjacent grad	de N/A	
c) Total net are	ea of flood op	enings in A9.b N/A	sq in				
d) Engineered	flood opening	gs? ∐Yes ⊠ Ño	)				
		OTTON D. FLOOD II	ICUDANCE DAT	E MAD (FIDM)	INCORRATIO		
D4 NEID Commission		CTION B - FLOOD IN			INFORMATIO	JN	
B1. NFIP Communi WAVELAND 28526	-	ominantly Number	1	County Name ANCOCK			B3. State MS
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/	B8. Flo	od Zone(s)		e Flood Elevation(s) ne AO, use Base
28045C0342	D.	10/16/09	Revised Date 10/16/09	AE	1	Floo	d Depth) 7
B10. Indicate the so	ource of the B	ase Flood Elevation (E	BFE) data or base	flood depth ente	red in Item B9	:	
☐ FIS Profile	X FIRM	Community Determ	ined Other/S	ource:			
B11. Indicate eleva	ition datum u	sed for BFE in Item B9	: NGVD 1929	X NAVD 1988	8	/Source:	
B12. Is the building	located in a	Coastal Barrier Resou	rces System (CBF	RS) area or Othe	rwise Protecte	d Area (C	PPA)? Yes No
Designation D			BRS   OPA				
			hanned				

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or 1406 ONTARIO TREET	Policy Number:		
City WAVELAND State I	Company NAIC Number		
SECTION C – BUILDING EL	EVATION INFORMA	TION (SURVEY R	REQUIRED)
		uilding Under Const	truction* X Finished Construction
*A new Elevation Certificate will be required when c			PIAE ABIA1 A20 ABIAH ABIAO
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build Benchmark Utilized: USM VRS NETWORK			
ZID (1) do 20676	241 61612		Cha TVAVV
Indicate elevation datum used for the elevations in it  NGVD 1929 X NAVD 1988 Other/s	Source: 19dmu// 19016	ick Numbers, Tax P	A3. Properly Faccation (Lateral Blance
Datum used for building elevations must be the sam	e as that used for the	BFE.	Check the measurement used.
a) Top of bottom floor (including basement, crawlsp	pace, or enclosure floor	19.4	feet meters
b) Top of the next higher floor	ng 89-23-57 S	N/A8	feet meters
c) Bottom of the lowest horizontal structural member	er (V Zones only)	N/A	
d) Attached garage (top of slab)		N/A .	feet meters
e) Lowest elevation of machinery or equipment ser     (Describe type of equipment and location in Com		18.7	
f) Lowest adjacent (finished) grade next to building	(LAG)	9.5.	X feet ☐ meters
g) Highest adjacent (finished) grade next to building	(HAG)	Wate at 9.7 ag tines	
h) Lowest adjacent grade at lowest elevation of dec structural support		N/A .	feet meters
SECTION D – SURVEYOR,	ENGINEER OR AR	CHITECT CERTIE	ECATION
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un	rveyor, engineer, or arc my best efforts to inte	chitect authorized by rpret the data availa	v law to certify elevation information.
Were latitude and longitude in Section A provided by a lie	censed land surveyor?	☑Yes ☐ No	Check here if attachments.
Certifier's Name	License Number	AWI di@Ainiar	on evo periodical
Donald E Ried	PLS 3037		LOE
Title LAND SURVEYOR		Chillin gold	AND PROFESTINE
Company Name RIED & ASSOCIATES LLC	MACA SA SA MASILI Back SB	was Ecoon INS	THE PUBLICATION OF THE PUBLICATI
Address 9526 BENESHEEWAH TRAIL	I MMCO	HEAM SOME	F 3037
City PASS CHRISTIAN	State MS	ZIP Code 39571	OF MISSISTAN
Signature	Date 11/08/17	Telephone 228 205-4007	and and an annual and an annual of
Copy all pages of his Elevation Certificate and all attachme	nts for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner
Comments (including type of equipment and location, per AIR CONDITONER AT 18.65 FEET. FINISH FLOOR IS WHICH MEETS THE CITY OF WAVELAND REQUIREM ELEVATION	1.4 FEET ABOVE BAS ENT OF 1 FOOT ABO	SE FLOOD ELEVAT VE BASE FLOOD	TION TO THE SECOND STATE OF THE SECOND STATE O
e or Citranvisc Protected Area (UPPA)? [Yas_Yavanis]			

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY US						
Building Street Address (including Apt., Unit, Suite, and/ 1406 ONTARIO STREET	or Bldg. No.) or P.O. Ro	oute and Box No.	Policy Number:			
City WAVELAND S	tate MS ZII	P Code 39576	Company NAIC Number			
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)						
For Zones AO and A (without BFE), complete Items E1-complete Sections A, B, and C. For Items E1-E4, use na enter meters.	itural grade, if available	. Check the measure	ment used. In Puerto Rico only,			
<ul> <li>E1. Provide elevation information for the following and c the highest adjacent grade (HAG) and the lowest ac</li> <li>a) Top of bottom floor (including basement,</li> </ul>		oxes to snow whether	The elevation is above or below			
crawlspace, or enclosure) is	N/A	feet meter	sabove orbelow the HAG.			
<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>	<u>N/A</u>	feetmeter	sabove orbelow the LAG.			
E2. For Building Diagrams 6–9 with permanent flood ope	enings provided in Sect	ion A Items 8 and/or	9 (see pages 1–2 of Instructions),			
the next higher floor (elevation C2.b in the diagrams) of the building is	<u>N/A</u>	feetmeter	s above or below the HAG.			
E3. Attached garage (top of slab) is	<u>N/A</u>	feet _ meter	's □above or □below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is	N/A	feetmeter	rsabove orbelow the HAG.			
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes			cordance with the community's certify this information in Section G.			
SECTION F PROPERTY OWN	ER (OR OWNER'S RE	PRESENTATIVE) CE	RTIFICATION			
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	e who completes Section e statements in Section	ons A, B, and E for Zo s A, B, and E are cor	ne A (without a FEMA-issued or rect to the best of my knowledge.			
Property Owner or Owner's Authorized Representative's	Name					
Address	City	Sti	ate ZIP Code			
Signature	Date	Те	lephone			
Comments						
			Check here if attachments.			

OMB No. 1660-0008

Expiration Date: November 30, 2018,

IMPORTANT: In these spaces, copy the corre	esponding information from Section A.	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 1406 ONTARIO STREET	uite, and/or Bldg. No.) or P.O. Route and Box l	No. Policy Number:		
City WAVELAND	State MS ZIP Code 39576			
SECTION	ON G - COMMUNITY INFORMATION (OPTIO	NAL)		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en G1.   The information in Section C was tak	Certificate. Complete the applicable item(s) a	nd sign below. Check the measurement		
engineer, or architect who is authoriz data in the Comments area below.)	ed by law to certify elevation information. (Indi	cate the source and date of the elevation		
G2. A community official completed Section or Zone AO.	on E for a building located in Zone A (without a	a FEMA-Issued of community-Issued BFE)		
G3. The following information (Items G4-	G10) is provided for community floodplain man	nagement purposes.		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction	ent		
G8. Elevation of as-built lowest floor (including of the building:	j basement) [	feet meters Datum		
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	feet meters Datum		
G10. Community's design flood elevation:	[	feet meters Datum		
Local Official's Name	Title			
Community Name	Telephone			
Signature	Date			
Comments (including type of equipment and loc	cation, per C2(e), if applicable)	☐ Check here if attachments.		

### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

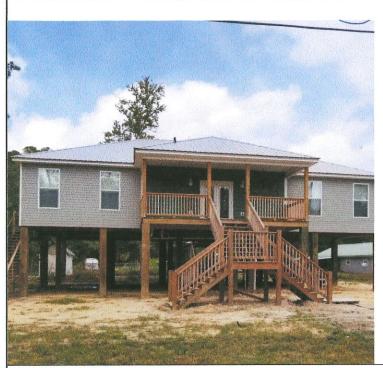
OMB No. 1660-0008

Expiration Date: November 30, 2018

### **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces	FOR INSURANCE COMPANY USE		
Building Street Address (included 1406 ONTARIO STREET	ling Apt., Unit, Suite, and/or E	Bldg. No.) or P.O. Route and Box No.	Policy Number:
City State WAVELAND	MS	ZIP Code 39576	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



FRONT 11/08/17



REAR 11/08/17

## U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

Federal Emergency Management Agency National Flood Insurance Program OMB No. 1660-0008

Expiration Date: November 30, 2018

## **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SECT	ION A - PROPERTY	INFORMATION	F	OR INSUF	RANCE COMPANY USE
A1. Building Owner STEVEN J DRURY I				F	Policy Num	ber:
A2. Building Street A Box No. 1406 ONTARIO STR		uding Apt., Unit, Suite,	and/or Bldg. No.) or P.C	). Route and	Company N	AIC Number:
City WAVELAND			State MS	Z	IP Code 3	9576
A3. Property Descri TAX PARCEL ID # 1			( Parcel Number, Legal E	Description, etc.)		
A4. Building Use (e.	g., Resident	ial, Non-Residential, A	Addition, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longitu	de: Lat. 30	-13-18.3 I	Long. 89-23-57.5	Horizontal Datur	n NAD 1	927 X NAD 83
A6. Attach at least 2	! photograph	s of the building if the	Certificate is being used	to obtain flood insurar	ce.	
A7. Building Diagrar	n Number	5				
A8. For a building w	ith a crawlsp	pace or enclosure(s):				
a) Square foota	ige of crawls	pace or enclosure(s)	N/A sq ft			
b) Number of p	ermanent flo	od openings in the cra	wispace or enclosure(s)	within 1.0 foot above a	adjacent gr	ade N/A
c) Total net are	a of flood op	enings in A8.b N/A	sq in			
d) Engineered f	lood opening	gs? □Yes ☑No	<del></del>			
A9. For a building w	ith an attach	ed garage:				
a) Square foota	ge of attach	ed garage <u>N/A</u> so	ų ft			
b) Number of p	ermanent flo	od openings in the att	ached garage within 1.0	foot above adjacent gr	ade N/A	
c) Total net area	a of flood op	enings in A9.b N/A	sq in			
d) Engineered f	lood openin	gs? ☐ Yes ☒ N	0			
	SE	CTION B - FLOOD IN	SURANCE RATE MA	P (FIRM) INFORMAT	ION	
B1. NFIP Community	y Name & C	ommunity Number	B2. Coun	ty Name		
WAVELAND 285262	2		HANCO	CK		B3. State MS
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/	B8. Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base
28045C0342	D	10/16/09	Revised Date 10/16/09	AE	į.	od Depth) 17
B10. Indicate the sou	urce of the E	ase Flood Elevation (	BFE) data or base flood o	lepth entered in Item E	<b>39</b> :	
☐ FIS Profile	X FIRM	Community Determ	nined Other/Source:			
B11. Indicate elevat	ion datum u	sed for BFE in Item B9	): NGVD 1929 X	NAVD 1988 🔲 Oth	er/Source:	Market Market
B12. Is the building	located in a	Coastal Barrier Resou	ırces System (CBRS) are	ea or Otherwise Protec	ted Area (0	DPA)? ☐ Yes K∏No
Designation Da			CBRS OPA			<del>_</del>
-		£	سب			

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding			FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/o 1406 ONTARIO TREET	or Bldg. No.) or P.O. Ro	ute and Box No.	Policy Number:	5.0	
City WAVELAND State	MS ZIF	Code 39576	Company NAIC I	Number	
SECTION C – BUILDING EI	LEVATION INFORMA	TION (SURVEY R	EQUIRED)	o Complete Co	
*A new Elevation Certificate will be required when a C2. Elevations – Zones A1–A30, AE, AH, A (with BFE). Complete Items C2.a–h below according to the built	construction of the build , VE, V1–V30, V (with E lding diagram specified	BFE), AR, AR/A, AR in Item A7. In Puer	/AE, AR/A1–A30, A	AR/AH, AR/AO.	
Benchmark Utilized: VRS NETWORK	Vertical Datum:	NAVD 88	****		
Indicate elevation datum used for the elevations in		.wc.			
☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/ Datum used for building elevations must be the sar	Cource.		G. 11-68-0 100 1 1	AX PARCELLE	
Datum used for building elevations must be the sai	ne as that used for the	DFC.	Check the me	asurement used.	
a) Top of bottom floor (including basement, crawls	pace, or enclosure floo	r) 19.4 .	X feet	meters	
b) Top of the next higher floor		N/A . 5.81	feet	meters	
c) Bottom of the lowest horizontal structural memb	er (V Zones only)	N/A	X feet	meters	
d) Attached garage (top of slab)	British of the Sant Lines	N/A .	feet	meters	
Example 2		N/A	<u>X</u> _feet	meters	
f) Lowest adjacent (finished) grade next to building	g (LAG)	9.5.	X feet	meters	
g) Highest adjacent (finished) grade next to buildin	ng (HAG)	visio elli 9.7 eninego	X feet	meters	
h) Lowest adjacent grade at lowest elevation of de structural support		N/A	X fee	et meters	
SECTION D – SURVEYOR	. ENGINEER. OR AR	CHITECT CERTIF	ICATION	muenipe il 16	
This certification is to be signed and sealed by a land sulficertify that the information on this Certificate represent statement may be punishable by fine or imprisonment under the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude in Section A provided by a leading to the latitude and longitude and latitude and lati	ts my best efforts to intender 18 U.S. Code, Section in the surveyor?	erpret the data availa ction 1001.	able. I understand t	hat any false	
Certifier's Name Donald E Ried	License Number PLS 3037		mage book to serv		
Title LAND SURVEYOR		001 (X) = 801 (-)	ALD I	English (b)	
Company Name	AM STATE CHANGS	WI-00031640	To lo R	re A	
RIED & ASSOCIATES LLC	B2, Coun	isawen Aunu		gal = N	
Address 9526 BENESHEEWAH TRAIL			A Shire	1037	
City PASS CHRISTIAN	State MS	ZIP Code 39571	FOF	125 Sanual	
Signature	Date 11/28/16	Telephone 228 205-4007		of plantal At C	
Copy all pages of this levation Certificate and all attachme	ents for (1) community o	fficial, (2) insurance	agent/company, an	d (3) building owner.	
Comments (including type of equipment and location, per BOTTM BOLT ON FIRE HYDRANT BOTTOM BOLT BE MARKED WITH ORANGE FLAGGING AT 4.72 FEET A ELEVATION OF FINISHED FLOOR MEETS CITY OF VABOVE BASE FLOOD ELEVATION IN SECTION B9	TWEEN MUE AND LE T SOUTH WEST COR	R AT 8.69 FEET NER OF LOT MENT OF 1 FOOT	ve ion datum used by located in a Col Date NAA	641 - nutreate ele P12 - la the brust Design micr	

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding	_			FOR INSURANCE CO	OMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/o 1406 ONTARIO STREET	or Bldg. No.) or P.O. Rou	ite and Box	No.	Policy Number:		
City WAVELAND St	ate MS ZIP	Code 3957		Company NAIC Numl	ber	
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)						
For Zones AO and A (without BFE), complete Items E1–complete Sections A, B,and C. For Items E1–E4, use nate enter meters.	E5. If the Certificate is in tural grade, if available. (	tended to s Check the r	support a l measurem	OMA or LOMR-F requent used. In Puerto R	luest, Rico only,	
E1. Provide elevation information for the following and change the highest adjacent grade (HAG) and the lowest ad a) Top of bottom floor (including basement,		es to show	whether t	he elevation is above	or below	
crawlspace, or enclosure) is b) Top of bottom floor (including basement,	N/A	feet	meters	above or be	elow the HAG.	
crawlspace, or enclosure) is	<u>N/A</u>	feet	meters		elow the LAG.	
E2. For Building Diagrams 6–9 with permanent flood ope the next higher floor (elevation C2.b in the diagrams) of the building is	nings provided in Sectio	n A Items 8	3 and/or 9			
E3. Attached garage (top of slab) is	<u>N/A</u>	feet	 meters	above or be	elow the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is	N/A	r∏feet	meters	□ above or □ be	elow the HAG.	
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes	is the top of the bottom f	loor elevat	سا ed in acco	ш	nunity's	
SECTION F - PROPERTY OWNI	ER (OR OWNER'S REPI	RESENTA	TIVE) CEF	RTIFICATION		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Section	s A, B, and	E for Zon	e A (without a FEMA-	issued or	
community-issued BFE) of Zone AO must sign here. The	statements in Sections	A, B, and b	= are corre	ict to the pest of my k	nowledge.	
Property Owner or Owner's Authorized Representative's		A, B, and b	= are corre	ect to the best of my k	nowledge.	
•		A, B, and E	= are corre		P Code	
Property Owner or Owner's Authorized Representative's	Name	A, B, and E	Stat			
Property Owner or Owner's Authorized Representative's Address	Name City	A, B, and E	Stat	e ZII		
Property Owner or Owner's Authorized Representative's  Address  Signature	Name City	A, B, and E	Stat	e ZII		
Property Owner or Owner's Authorized Representative's  Address  Signature	Name City	A, B, and E	Stat	e ZII	,	
Property Owner or Owner's Authorized Representative's  Address  Signature	Name City	A, B, and E	Stat	e ZII	,	
Property Owner or Owner's Authorized Representative's  Address  Signature	Name City	A, B, and t	Stat	e ZII	,	
Property Owner or Owner's Authorized Representative's  Address  Signature  Comments	Name City	A, B, and E	Stat	e ZII	,	
Property Owner or Owner's Authorized Representative's  Address  Signature  Comments	Name City	A, B, and E	Stat	e ZII	,	
Property Owner or Owner's Authorized Representative's  Address  Signature  Comments	Name City	A, B, and E	Stat	e ZII	,	
Property Owner or Owner's Authorized Representative's  Address  Signature  Comments	Name City	A, B, and E	Stat	e ZII	,	
Property Owner or Owner's Authorized Representative's  Address  Signature  Comments	Name City	A, B, and E	Stat	e ZII	,	
Property Owner or Owner's Authorized Representative's  Address  Signature  Comments	Name City	A, B, and E	Stat	e ZII	,	
Property Owner or Owner's Authorized Representative's  Address  Signature  Comments	Name City	A, B, and t	Stat	e ZII	,	

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, States on the Addre	uite, and/or Bldg. No.) or P.O. Route and Box	No. Policy Number:				
City WAVELAND	State MS ZIP Code 39576	Company NAIC Number				
SECTION G - COMMUNITY INFORMATION (OPTIONAL)						
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)						
G2. A community official completed Section or Zone AO.	on E for a building located in Zone A (without	a FEMA-issued or community-issued BFE)				
G3. The following information (Items G4-	G10) is provided for community floodplain ma	nagement purposes.				
G4. Permit Number s	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:	New Construction  Substantial Improvem	ent				
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet meters Datum				
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	feet meters Datum				
G10. Community's design flood elevation:	<u></u>	feet meters Datum				
Local Official's Name	Title					
Community Name	Telephone					
Signature	Date					
Comments (including type of equipment and loc	cation, per C2(e), if applicable)	□ Chack here if attachments				
		Check here if attachments.				

# U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

### **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

CIVID 140.	1000 0000
Expiration	Date: July 31, 2015

SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name STEPHEN J DRURY ETAL	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. UNIMPROVED LOTS ONTARIO STREET 1406 Ontario	Company NAIC Number:
City WAVELAND State MS ZIP Code 39576	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL ID # 138P-0-33-117.000	
or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Engineered flood openings?  Yes  No  SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMA  B1. NFIP Community Name & Community Number  B2. County Name	f attached garage N/A sq ft inent flood openings in the attached garage ove adjacent grade N/A flood openings in A9.b N/A sq in openings? Yes No
WAVELAND 285262 HANCOCK	MS
B4. Map/Panel Number 28045C0342 B5. Suffix D 10/16/09 B6. FIRM Index Date 10/16/09 Effective/Revised Date 10/16/09 AE	
Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OP/Designation Date: N/A ☐ CBRS ☐ OPA  SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REC	QUIRED)
<ol> <li>Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.</li> <li>Benchmark Utilized: VRS NETWORK</li> </ol> Vertical Datum: NAVD-88	, AR/AH, AR/AO. Complete Items C2.a-h
Indicate elevation datum used for the elevations in items a) through h) below. $\square$ NGVD 1929 $\boxtimes$ NAVD 1988 Datum used for building elevations must be the same as that used for the BFE.	Other/Source:
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 18.0	⊠ feet ☐ meters
b) Top of the next higher floor and processes of successes as a N/A.	⊠ feet ☐ meters
c) Bottom of the lowest horizontal structural member (V Zones only)  N/A.	☑ feet ☐ meters
d) Attached garage (top of slab)  e) Lowest elevation of machinery or equipment servicing the building  N/A	
(Describe type of equipment and location in Comments)	Edit remark monthers Sections A. D.
f) Lowest adjacent (finished) grade next to building (LAG) 8.6  g) Highest adjacent (finished) grade next to building (HAG) 9.2	☑ feet ☐ meters
g) Highest adjacent (finished) grade next to building (HAG)  9.2  h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support  N/A.	
900 pt 70 Dg	
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICA	
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify e information. I certify that the information on this Certificate represents my best efforts to interpret the data available I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 100    Check here if comments are provided on back of form. Were latitude and longitude in Section A provided Check here if attachments.	9. 01.
Certifier's Name DONALD E RIED License Number 3037	TOUT VERY
Title LAND SURVEYOR Company Name RIED & ASSOCIATES LLC	PS 3037
Address 9526 BENESHEEWAH TRAIL City PASS CHRISTIAN State MS ZIP Code 39571	MISSIS
Signature Date 06/20/16 Telephone 228 205-4007	Folicy St obec

ELEVATION CERTIFICATE, pa	nge 2			
IMPORTANT: In these spaces, c	opy the corresponding information from	Section A.	FOF	R INSURANCE COMPANY USE
Building Street Address (including Apt. UNIMPROVED LOT ONTARIO STREET	, Unit, Suite, and/or Bldg. No.) or P.O. Route and ET	Box No.	Poli	cy Number:
City WAVELAND	State MS	ZIP Code 39	576 Con	npany NAIC Number:
SECTION	D - SURVEYOR, ENGINEER, OR ARCHIT	ECT CERT	IFICATION (CONT	INUED)
Copy both sides of this Elevation Certi	ficate for (1) community official, (2) insurance age	nt/company,	and (3) building owne	Г.
ELEVATION IN C2a IS 1 FOOT	OM BOLT ON FIRE HYDRANT BETWEEN MUE &	LER PAINT	ED ORANGE AT 8.69	FEET TOP OF BOTTOM FLOOR
Signature				
Signature	Date (	06/20/16		
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT R	QUIRED)	FOR ZONE AO AN	D ZONE A (WITHOUT BFE)
and C. For Items E1-E4, use natural get.  Provide elevation information for grade (HAG) and the lowest adjact a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6-9 with gelevation C2.b in the diagrams)  E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth	basement, crawlspace, or enclosure) isbasement, crawlspace, or enclosure) isbermanent flood openings provided in Section A It of the building is	In Puerto Ric show whether fems 8 and/or ters abo or belov feet elevated in a	co only, enter meters.  er the elevation is about eet	ve or below the highest adjacent bove or ☐ below the HAG. bove or ☐ below the LAG. Instructions), the next higher floor AG. or ☐ below the HAG.
SECTION	F - PROPERTY OWNER (OR OWNER'S F	REPRESEN	TATIVE) CERTIFIC	CATION
	zed representative who completes Sections A, B, nents in Sections A, B, and E are correct to the be ed Representative's Name		,	-issued or community-issued BFE)
Address	City		State	ZIP Code
Signature	Date		Telephone	
Comments				
				Check here if attachments.
	SECTION G - COMMUNITY INFORM			T. O. C. A. B. O. C. E. L. L.
	or ordinance to administer the community's floodp applicable item(s) and sign below. Check the mea			
	vas taken from other documentation that has beel elevation information. (Indicate the source and de			
	d Section E for a building located in Zone A (witho		_	ssued BFE) or Zone AO.
33. The following information (Iten	ns G4–G10) is provided for community floodplain	management	purposes.	
G4. Permit Number	G5. Date Permit Issued	G6. Date	Certificate Of Complia	nce/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ Substantial Imp	rovement		
38. Elevation of as-built lowest floor (in	cluding basement) of the building:	☐ feet	meters Da	atum
G9. BFE or (in Zone AO) depth of flood	ling at the building site:	☐ feet	☐ meters Da	itum
G10. Community's design flood elevation	n:	☐ feet	☐ meters Da	
Local Official's Name	Title	<del>;</del>		
Community Name	Tel	ephone		
Signature	Dat	е		
Comments				☐ Check here if attachments.